

CONSENT FOR EMERGENCY & MEDICAL CARE TREATMENT:

I give permission that my child, _____, may be given emergency/first aid treatment by a qualified staff member of the YMCA of the Inland Northwest. I also give my permission for my child to be transported by ambulance or aid car to an emergency center for treatment. **I do not want emergency treatment for my child, please refer to plan.**

In the event that I cannot be contacted, I further consent to the medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by the physician to safeguard my child’s health.

Signature of Parent/Guardian _____ Date _____

CONSENT TRANSPORTATION

I give permission for my child to go on supervised weekly Field Trips with the YMCA’s Day Camp & School-Age Care Programs.

Yes No

Signature of Parent/Guardian _____ Date _____

CONSENT FOR PHOTO AND VIDEO:

I give permission to the YMCA of the Inland Northwest to take pictures or videos of my child during our YMCA Day Camp Programs. I understand that pictures may be used for testimonials, videos or photos of activities and/or marketing purposes for YMCA of the USA.

YMCA Social Media & Marketing Permission Yes No Activity Photos Only Yes No

Signature of Parent/Guardian _____ Date _____

SUNSCREEN PERMISSION:

During our summer day camp sessions, we spend the majority of our time outdoors. In order to minimize the effects of the exposure to the sun, we encourage parents to do one or more of the following:

- Send sunscreen every day in a labeled bottle
- Apply sunscreen prior to coming to camp each day
- Educate your child about how to apply sunscreen
- Encourage your child to wear a hat to protect the face
- Provide your child with a cotton t shirt for swimming

Please check the appropriate box below

I will provide my own sunscreen for my child with my child’s name on it, the YMCA staff may assist in the application.

I give my permission to the YMCA to use Equate Sunscreen if I forget to send it, YMCA staff may assist in the application (see Equate Sunscreen ingredients below).

I do not want my child to use sunscreen while in camp.

Parent’s/guardians signature _____ Date _____

Equate Sunscreen SPF 50

Active Ingredients: Avobenzene 3%, Homosalate 13%, Octisalate 5%, Octocrylene 7%, Oxybenzone 4%. Purpose: Sunscreen. Inactive Ingredients: Water, Sorbitol, Aluminum Starch Octenylsuccinate, Vp/Eicosene Copolymer, Stearic Acid, Triethanolamine, Sorbitan Isostearate, Benzyl Alcohol, Dimethicone, Tocopherol (Vitamin E), Polyglyceryl-3 Distearate, Fragrance, Methylparaben, Carbomer, Propylparaben, Disodium EDTA.

The following guidelines will be followed when applying sunscreen:

- Kindergarteners–staff initiated, re-applied at appropriate intervals, staff will assist in application.
- Elementary grades–staff & child initiated reminders for re-application by Y staff at appropriate intervals, staff may assist younger children under 7 with application. Most children will be encouraged to rub sunscreen in themselves.
- Middle school grades–youth initiated, staff will remind youth at appropriate intervals or based on specific activities, your child will self-apply sunscreen.

HAND SANTIZER AND/OR HAND WIPES:

If soap and water is not available for hand washing I give my permission for my child to use hand sanitizer or hand wipes. **Yes No**

Parent’s/guardians signature _____ Date _____



SUMMER DAY CAMP 2017

Consent Agreements & Parent Statement of Understanding

Child's name _____

My child has my permission to participate in the YMCA sponsored Day Camp & School-Age Care Programs.

1. I will be responsible for all fees accumulated as a result of my child's registration and participation in YMCA programs. I understand that all fees are payable in advance and that program participation will be denied if payments are past due. All past due accounts will be referred to collection.
2. I have received a Parent Handbook and understand the program's policies and fees.
3. I give my permission for my child to go on supervised field trips with the YMCA's Day Camp & School-Age Care Programs.
4. I give permission for my child to participate all activities, including swimming, to be supervised by YMCA staff or qualified lifeguards. If I do not want my child to participate I will give written notice.
5. To the best of my knowledge, my child is in good health. I understand that the YMCA has safety standards in its programs and that all activities will be properly supervised. The YMCA does not provide individual accident insurance; therefore, I will provide the necessary coverage in the event of an accident.
6. The YMCA cannot be held responsible for problems related to a child's failure to receive the required immunizations.
7. **PHOTO RELEASE-I give permission for my child to be involved in photograph's or other media to promote or interpret YMCA programs.**

Initial: Yes _____ No _____

8. While in the YMCA's care, YMCA staff and volunteers will not transport a child in a private vehicle without the parent's specific permission.
9. When leaving a child at the YMCA or program site, he/she must be signed in and make sure a program staff or volunteer is available to receive and supervise your child. The YMCA staff will not call to verify absences when a child is not signed in.
10. The YMCA will release children only to people authorized by the parent/guardian. If a parent/guardian desires to have a YMCA employee provide childcare or other services outside of the YMCA program or check their child in or out of the program; they must first sign a disclaimer/waiver statement. In these situations, it is the parent(s) who are responsible for implementing the appropriate child abuse prevention measures. The YMCA is not responsible for the independent acts of its employees outside of the work place.
11. Day Camp & School-Age Care staff and volunteers are required by state law to report suspected child abuse. This will be handled confidentially through a staff person's supervisor and the program director.
12. If the person picking up a child appears to be under the influence of drugs or alcohol, for the child's safety, that person will be asked to allow someone else on the authorized list to pick up the child. If that person insists on taking the child, the YMCA will make a report to the police and Child Protective Services. Please do not put our employees and volunteers in a position where they have to make this judgment call.
13. Parents/Guardians may drop in and visit with their children at any time.
14. The YMCA takes all accusations of child abuse seriously. To protect children, staff and/or volunteers accused of abuse may be suspended from the program. To protect staff and volunteers, children and/or parents making false accusations of abuse may be suspended from the program.
15. The YMCA has a comprehensive disaster plan for each site. The plan will be posted on the parent board for your review and signature.
16. Weapons, including but not limited to, knives and or firearms are not allowed at day camp and may result in suspension.

I have received a copy of the Parent Information Packet and I have read, understand and agree with the Consent Agreements.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____